
COMBINED DECLARATION AND POWER OF ATTORNEY

**(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION, OR C-I-P)**

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is for an original application.

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original, first and joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

MICROBLADE ARRAY IMPACT APPLICATOR

SPECIFICATION IDENTIFICATION

The specification is attached hereto.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, Section 1.56.

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)
(35 U.S.C. Section 119(e))

I hereby claim the benefit under Title 35, United States Code, Section 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER

60/240,436

FILING DATE

October 13, 2000

POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

APPOINTED PRACTITIONER(S)	REGISTRATION NUMBER(S)
D. Byron Miller	30,661
Owen J. Bates	40,346
Pauline Ann Clarke	29,783
Vandana Date	38,675
Robert R. Neller	46,950
Paul B. Simboli	38,616
Samuel E. Webb	44,294

I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO**DIRECT TELEPHONE CALLS TO:**

Owen J. Bates
(650)-564-7867

Owen J. Bates
1900 Charleston Road, P.O. Box 7210
M10-3
Mountain View, CA 94039-7210
United States of America

Customer Number 22921

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

JOSEPH C. TRAUTMAN

Inventor's signature _____

Date _____ Country of Citizenship U.S.A.

Residence Sunnyvale, CA

Post Office Address 1900 Charleston Rd., M10-3, Mountain View, CA 94043-7210

■■■■■■■

RICHARD L. KEENAN

Inventor's signature _____

Date _____ Country of Citizenship U.S.A.

Residence Saratoga, CA

Post Office Address 1900 Charleston Rd., M10-3, Mountain View, CA 94043-7210

■■■■■■■

MICHEAL T. CAO

Inventor's signature _____

Date _____ Country of Citizenship U.S.A.

Residence Milpitas, CA

Post Office Address 1900 Charleston Rd., M10-3, Mountain View, CA 94043-7210